



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 1671

<b>SERIAL NUMBER</b> 10/782,738	<b>FILING or 371(c) DATE</b> 02/18/2004 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> HBZ-013CNRCE
<b>APPLICANTS</b> Andreas H. Sarris, Houston, TX; Fernando Cabanillas, Houston, TX; Patricia M. Logan, Vancouver, CANADA; Clive T. R. Burge, Brentwood Bay, CANADA; James H. Goldie, Vancouver, CANADA; Murray S. Webb, Delta, CANADA; Add Lawrence D. Mayer as the inventor seven. See petition filed on 6-20-07 which is approved.				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/541,436 03/31/2000 PAT 6,723,338 * which claims benefit of 60/137,194 06/02/1999 and claims benefit of 60/127,444 04/01/1999 (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/12/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <input type="checkbox"/> Yes <input type="checkbox"/> No Examiner's Signature _____	<input type="checkbox"/> Met after Allowance Initials _____	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 16
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> SEED INTELLECTUAL PROPERTY LAW GROUP PLLC 701 FIFTH AVE SUITE 5400 SEATTLE, WA 98104 UNITED STATES				
<b>TITLE</b> COMPOSITIONS AND METHODS FOR TREATING LYMPHOMA				
<b>FILING FEE RECEIVED</b> 1200	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	